



Donation Form
PLEASE PRINT CLEARLY

For every donation to the Memorial Affiliate of Susan G. Komen®, 75% stays in our community to support local community health programs that focus on education and outreach, screening and treatment. The remaining 25% supports the Komen Award and Research Grant Program, which funds groundbreaking breast cancer research.

Name: \_\_\_\_\_

Address: \_\_\_\_\_
(If using credit card print billing address)

City State Zip

Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Email: \_\_\_\_\_

Please accept my tax-deductible donation of \$ \_\_\_\_\_

Please use my credit card: AMEX MasterCard VISA DISCOVER
Credit Card #: \_\_\_\_\_ Exp Date: \_\_\_\_/\_\_\_\_ CVV: \_\_\_\_\_

Donor Signature

Enclosed is my check. Please make payable to: Susan G. Komen for the Cure.
In Honor of: \_\_\_\_\_
In Memory of: \_\_\_\_\_

Please Send a Tribute Card to:

Name: \_\_\_\_\_
Address: \_\_\_\_\_

In Support of Race Participant: \_\_\_\_\_
Who is a participant in the \_\_\_\_\_ Race for the Cure.
(city where Race is held)

Mail to:
Susan G. Komen Memorial Affiliate
Attn: (Race City if Applicable)
4700 N. University St., Suite 91
Peoria, IL 61614-5849

Your gift will make an impact. Thank you!

No goods or services were provided in exchange for this donation. You will receive a tax receipt for your donation after your donation has been received and processed. Thank you.